

GENERAL DISCHARGE PERMIT FOR STORM WATER ASSOCIATED WITH INDUSTRIAL ACTIVITY

NOTICE OF TERMINATION

This form is to be used when

- * property ownership has changed
- * the operator of a facility changes
- * the storm water discharge has been eliminated
- * facility is no longer in operation

MAILING ADDRESS OF THE INDUSTRIAL SITE

(provide County, Township, Range, Section & ¼ Section)

	OWNER	OPERATOR
NAME		
ADDRESS		
CITY, STATE, ZIP		
PHONE		

PERMIT # MTR0

Documentation of proper site stabilization is required for all projects.

REASON FOR TERMINATION

<input type="checkbox"/>	Property ownership has changed
<input type="checkbox"/>	Operator at the facility has changed
<input type="checkbox"/>	Storm Water discharge eliminated
<input type="checkbox"/>	Facility is no longer in operation

DETAIL REASON FOR TERMINATION

"I certify under penalty of the law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations."

Authorized Signature

Date

Send completed Notice of Termination to:

STORM WATER PROGRAM
PERMITTING AND COMPLIANCE DIVISION
DEPARTMENT OF ENVIRONMENTAL QUALITY
PO BOX 200901
HELENA MT 59620-0901